

Preferred Drug List - Mental Health Workgroup Meeting

December 3, 2004

1:00 p.m. to 4:00 p.m.

Room 207, DPHHS Sanders Building

111 N. Sanders, Helena

Welcome / Workgroup Introduction

Previous Meeting Minutes Review – October 22, 2004

Department Information (PDL Information – www.mtmedicaid.org)

- State Plan Amendment Update
- Formulary Committee Update (Mark)
 - December 15 Meeting Preview
- Comprehensive NeuroScience (CNS) Update

Discussion Topics

- Grievance Process (see attached draft)
- Evaluation of the PDL Implementation on the Medicaid programs

Public Comments

Upcoming Workgroup Meetings – January 14, 2005 - DPHHS Building, Room 207.

Future meetings topics:

- PDL Impact Tracking
- Final Report of Workgroup Info

Note: The public is welcome to attend meetings, however, in order to proceed in a timely manner, only workgroup participants are able to participate in the discussion. The public will be given an opportunity to make comments at the end of the meeting. If you have questions regarding the PDL –Mental Health Workgroup, please contact Duane Preshinger, Acute Services Bureau Chief at (406) 444-4144 or email at dpreshinger@state.mt.us.

Draft Medicaid Pharmacy Program PDL Appeal Process

1. Process starts when a client issued a denial at the Pharmacy Point of Sale for a medication categorized as non-preferred on the preferred drug list (PDL).
 - a. For denials of new medications (medications that Montana Medicaid has not previously paid for), client will follow standard fair hearing procedures.
 - b. For denials of medications that a client has been taking prior to the implementation of the PDL and are now categorized, as “non-preferred”, client will be given a pamphlet at the Point of Sale counter. Pamphlet will provide:
 - i. General information how to resolve pharmacy issues.
 - ii. Information on how to request an appeal and outlines their right to fair hearing.
 - iii. Steps the client can take to request medication pending appeal action. For medications the client has been receiving from Medicaid prior to the implementation of the PDL, pharmacy may dispense a 34- day supply via Prior Authorization until decision is made from the Administrative Review.
2. Client’s pharmacy or physician may initiate the Fair Hearing process by requesting an Administrative Review through the Medicaid Drug Prior Authorization contractor.
 - a. The Medicaid Drug PA unit will then notify the Department’s pharmacist or designee of the request for Fair Hearing.
 - b. Client or their representative may contact the Department directly to appeal the denial and request an Administrative Review.
3. The Department’s pharmacist or designee will then perform an Administrative Review and render a decision within 3 business days after receiving all requested information. The Department will provide the Administrative Review determination in writing.
 - a. If the determination is not in favor of the client the Department will advise the client of their right to appeal the Administrative Review decision.
 - b. The Department will provide a roster to the Office of Fair Hearings of all clients who have elected to use the quick administrative review process. Client’s who have used the quick administrative review process and elect to appeal a decision not in their favor will be scheduled for a Fair Hearing in accordance with the Administrative Rules of Montana.